Fill in this information to identify your	case:
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1: Identify Yourself		
	-	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or	Sherrellis First Name	First Name
	passport).	Middle Name	Middle Name
	F3.00F3.49.	Stinnette	
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First Name	First Name
	Include your married or	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>4</u> <u>4</u> <u>0</u> <u>7</u>	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx
4.	Any business names and Employer Identification Numbers	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
	(EIN) you have used in the last 8 years	Business name	Business name
	Include trade names and doing business as names	Business name	Business name
	doing business as names	Business name	Business name

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First Name	Middle Name Docasi Name 1 Page 2 of 2 About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
	EIN	EIN
Where you live		If Debtor 2 lives at a different address:
•	544 S. ML King Jr. Ave.	
	Number Street	Number Street
	Waukegan IL 60085 City State ZIP Code	City State ZIP Code
	Lake	
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
Why you are choosing	Check one:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)
Part 2: Tell the Court	About Your Bankruptcy Case	
The chapter of the Bankruptcy Code you	Check one: (For a brief description of each, see No for Bankruptcy (Form 2010)). Also, go to the top of	otice Required by 11 U.S.C. § 342(b) for Individuals F page 1 and check the appropriate box.
are choosing to file under	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	– '	

Deb	tor 1 Case 16-06336	Doc 1	Filed 02/25/16 Enter	ed 02/25/1	6 15:47:29 nber (if known) _	Desc Main	
	First Name	Middle Name	Document Page	3 01 40	` / =		
8.	How you will pay the fee	court pay w	pay the entire fee when I file my for more details about how you m ith cash, cashier's check, or mone f, your attorney may pay with a cre	ay pay. Typical ey order. If youi	ly, if you are payi r attorney is subn	ng the fee yourself, y	ou may
			d to pay the fee in installments. duals to Pay Your Filing Fee in In	•		nd attach the Applica	ation for
		By law than fee in	west that my fee be waived (You w, a judge may, but is not required 150% of the official poverty line the installments). If you choose this Fee Waived (Official Form 103B)	I to, waive your at applies to you option, you mus	fee, and may do ur family size and st fill out the Appl	so only if your incom I you are unable to p	e is less ay the
9.	Have you filed for bankruptcy within the	□ No					
	last 8 years?	✓ Yes.					
		District N	D. of IL ESTRN DIV. (Ch.7 Di	i scharg When	10/31/2011 MM / DD / YYYY	Case number 11B	44307
		District		When	MM / DD / YYYY	Case number	
		District _		When	MM / DD / YYYY	Case number	
10.	Are any bankruptcy	☑ No					
	cases pending or being filed by a spouse who is	Yes.					
	not filing this case with	Debtor			Relationshi	p to you	
	you, or by a business partner, or by an	District				Case number,	
	affiliate?	_			MM / DD / YYYY		
		Debtor _			Relationshi	p to you	
		District _		When	MM / DD / YYYY	Case number,	
11.	Do you rent your residence?	✓ No. ☐ Yes.	Go to line 12. Has your landlord obtained an erresidence? No. Go to line 12.	viction judgmen			in your
			Yes. Fill out Initial Stateme	nt About an Evi	ction Judgment A	Against You (Form 10)1A)

and file it with this bankruptcy petition.

Deb		Doo		Filed 02/25/16 Document	Entered 02 Page 4 of 4	2/25/16 15:47:29 ase number (if known)	Desc	Main
Pa	art 3: Report About A	ny Bı	ısine	sses You Own as	a Sole Proprie	tor		
12.	Are you a sole proprietor of any full- or part-time business?			Go to Part 4. Name and location of b	ousiness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any Number Street				
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Single Asset Rea Stockbroker (as of	ness (as defined in a lestate (as defined in 11 U.S.6 defined in 1	n 11 U.S.C. § 101(27A)) ed in 11 U.S.C. § 101(51B	ZIP Co	de
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>	can mos	set ap st rece	opropriate deadlines. If nt balance sheet, staten	you indicate that y nent of operations	ow whether you are a small ou are a small business of cash-flow statement, and procedure in 11 U.S.C. §	lebtor, you I federal in	must attach your come tax return
	debtor?		No.	I am not filing under C	hapter 11.			
	For a definition of small business debtor, see		No.	I am filing under Chap the Bankruptcy Code.	ter 11, but I am No	OT a small business debto	or accordin	g to the definition in
	11 U.S.C. § 101(51D).		Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Pa	Report If You O	wn o	r Hav	e Any Hazardous I	Property or Ar	y Property That Ne	eds Imm	ediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable		No Yes.	What is the hazard?				
	hazard to public health or safety? Or do you own any property that needs immediate attention?			If immediate attention	is needed, why is	it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property	? Number Street			
					City		State	ZIP Code

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

am not requ	ired to r	receive a	briefing	about
credit counse				

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

Г	I am not required to receive a briefing about
_	credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Pa	Answer These	Question	s for Reporting Pu	pos	ses		
16.	What kind of debts do you have?		s "incurred by an individu No. Go to line 16b.				are defined in 11 U.S.C. § 101(8) nousehold purpose."
			noney for a business or in No. Go to line 16c.				are debts that you incurred to obtain the business or investment.
		16c. S	tate the type of debts yo	u ow	e that are not consume	r or busine	ess debts.
17.	Are you filing under Chapter 7?	✓ No.	. I am not filing under	Chap	oter 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	☐ Yes	administrative expen	•	•	•	exempt property is excluded and le to distribute to unsecured creditors?
	administrative expenses are paid that funds will be available for distribution to unsecured creditors?		□ No □ Yes				
18.	How many creditors do you estimate that you owe?	ш			1,000-5,000 5,001-10,000 10,001-25,000		
19.	How much do you estimate your assets to be worth?	☑ \$50	\$50,000 0,001-\$100,000 00,001-\$500,000 00,001-\$1 million		\$1,000,001-\$10 millio \$10,000,001-\$50 millio \$50,000,001-\$100 mil \$100,000,001-\$500 m	on [\$10,000,000,001-\$50 billion
20.	How much do you estimate your liabilities to be?	☑ \$50	\$50,000 0,001-\$100,000 00,001-\$500,000 00,001-\$1 million		\$1,000,001-\$10 millio \$10,000,001-\$50 milli \$50,000,001-\$100 milli \$100,000,001-\$500 m	on [\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion
Pá	art 7: Sign Below						
or	you	I have e	· ·	d I d	eclare under penalty of	perjury tha	at the information provided is true
		or 13 of		•			d, if eligible, under Chapter 7, 11, 12, under each chapter, and I choose to
			orney represents me and document, I have obtain			-	e who is an attorney to help me fill U.S.C. § 342(b).
		I reques	t relief in accordance wit	h the	chapter of title 11, Uni	ted States	Code, specified in this petition.
		connecti		se ca	an result in fines up to \$		ng money or property by fraud in or imprisonment for up to 20 years,
			herrellis Stinnette		x		
			ature of Debtor 1			Signature	of Debtor 2

MM / DD / YYYY

MM / DD / YYYY

Debtor 1 Case 16-06336 Doc 1 Filed 02/25/16 Entered 02/25/16 15:47:29 Desc Main Stimpette Page 7 of 46 First Name Middle Name Document Page 7 of 46

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Kenneth S. Borcia	Da	te 02/20/2016	
Signature of Attorney for Debtor		MM / DD / YYYY	,
Kenneth S. Borcia			
Printed name			
Kenneth S. Borcia & Associat	es		
Firm Name			
1117 S. Milwaukee, Suite A-3			
Number Street			
-			
Libertyville	IL	60048	
City	State	ZIP Code	
Contact phone (847) 634-8800	Email address		
	Email address		
3125988 Bar number	Email address		

		Document Page 8 of 4	6	
Fill in this i	nformation to identify	your case and this filing:		
Debtor 1	Sherrellis	Stinnette		
	First Name Mi	ddle Name Last Name		
Debtor 2 (Spouse, if filing	ng) First Name Mi	ddle Name Last Name		
United States I	Bankruptcy Court for the: N	ORTHERN DISTRICT OF ILLINOIS		
Case number			☐ Check	if this is an
(if known)			_	ed filing
Official For	m 106A/B			
	A/B: Property			12/15
the asset in the filing together, sheet to this for	category where you think both are equally responsil rm. On the top of any add	cribe items. List an asset only once. If an actifits best. Be as complete and accurate a ple for supplying correct information. If monitional pages, write your name and case nurince, Building, Land, or Other Real E	s possible. If two married pe re space is needed, attach a s mber (if known). Answer eve	eople are separate ry question.
4 Da		itable interest in any residence building le		
□ No. G	n or have any legal or equ to to Part 2. Where is the property?	itable interest in any residence, building, la	nd, or similar property?	
1.1. home - 544 S. Ave., Waukeg	Martin Luther King Dr., an	What is the property? Check all that apply. ☐ Single-family home	Do not deduct secured clai amount of any secured clai Creditors Who Have Claim	ims on Schedule D:
		Duplex or multi-unit building Condominium or cooperative	Current value of the entire property?	Current value of the portion you own?
County		 ─ ☐ Manufactured or mobile home ☐ Land 	\$80,000.00	\$80,000.00
		☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of yo interest (such as fee simple entireties, or a life estate)	ole, tenancy by the
		Who has an interest in the property?	100% interest	
		Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is comm (see instructions)	nunity property
		Other information you wish to add about property identification number:		
		ou own for all of your entries from Part 1, in for Part 1. Write that number here	_	\$80,000.00
Part 2:	Describe Your Vehicle	es.		
		<u>- </u>		
-		able interest in any vehicles, whether they a ase a vehicle, also report it on Schedule G:	_	-
3. Cars, vans	, trucks, tractors, sport ut	ility vehicles, motorcycles		
□ No ☑ Yes				

Official Form 106A/B Schedule A/B: Property page 1

Deb	tor 1 Sherrel	lis	Do stiment		25/16 15:47:29 De se number (if known)	esc Main
	el: r: roximate mileage:	Mercedes 2007	Who has an interest in a Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the de	2 only	Do not deduct secured clair amount of any secured clair Creditors Who Have Claims Current value of the entire property? \$12,000.00	ms on <i>Schedule D:</i>
	er information: 7 Mercedes		Check if this is com	nmunity property		
Othe	rel: roximate mileage: er information: 8 Chevy Cobalt Watercraft, aircr	t raft, motor homes, ATV	Who has an interest in a Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the de Check if this is com (see instructions) S and other recreational venal watercraft, fishing vesses	2 only ebtors and another nmunity property rehicles, other veh		ms on Schedule D:
5.			own for all of your entries r Part 2. Write that number			\$16,000.00
	you own or have		and Household Item			Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No	pe Refrigerator, s	nens, china, kitchenware tove,washer/dryer bedr o, video & computer equ	oom furniture, k uipment, misc. h	itchen & living room ousehold goods, dining	\$1,000.00
7.	•	c collections; electronic	o, video, stereo, and digital e devices including cell phone			
8.	Collectibles of v Examples: Antiq stamp	ralue ues and figurines; painti	ings, prints, or other artwork collections; other collections	•		\$100.00
9.	Equipment for s Examples: Sport	ports and hobbies s, photographic, exercis	se, and other hobby equipments y tools; musical instruments	• •	ables, golf clubs, skis;	
	✓ No ☐ Yes. Describ	De				

Deb	tor 1	Case 16-0 Sherrellis		Doc 1	Filed 02/25/16 Document	5 Entered 02/25/16 15:47:29 Page 10 of 46 number (if known)	Desc Main
		First Name		Middle Name	Last Name		
10.	Firea Exar		rifles, shot	guns, ammur	nition, and related equ	ipment	
		No Yes. Describe					
11.	Clot Exar		y clothes,	furs, leather	coats, designer wear,	shoes, accessories	
	_	No Yes. Describe	clothi	ng			\$100.00
12.	Jew e Exar	•		costume jewe	elry, engagement rings	s, wedding rings, heirloom jewelry, watches, go	ems,
	_	No Yes. Describe	Furs	& jewelry			\$150.00
13.		-farm animals mples: Dogs, ca	ats, birds,	horses			
		No Yes. Describe					
14.	•	other persona not list	l and hou	sehold items	you did not already	list, including any health aids you	
		No Yes. Give spec information					
15.						ng any entries for pages you have	\$1,350.00
							· -
Pá	art 4	Describ	e Your l	Financial <i>A</i>			
Do y	art 4	wn or have an					Current value of the portion you own? Do not deduct secured claims or exemptions.
Do y	art 4 you o Casl	wn or have an	y legal or	equitable int	Assets erest in any of the fo		portion you own? Do not deduct secured claims or exemptions.
Do y	you o Casi	wn or have any h mples: Money y petition	y legal or ou have ir	equitable int	Assets erest in any of the fo	llowing?	portion you own? Do not deduct secured claims or exemptions.
Do <u>:</u> 16.	Casi Exar	h mples: Money y petition No Yes osits of money mples: Checkin brokerag	y legal or	equitable into a your wallet, so or other final, and other si	Assets erest in any of the form in your home, in a saf	ellowing?	portion you own? Do not deduct secured claims or exemptions.
Do <u>:</u> 16.	Casi Exar	h mples: Money y petition No Yes osits of money mples: Checkin brokerag	y legal or you have in g, savings ge houses in, list each	equitable into a your wallet,, or other fina, and other si	Assets erest in any of the form in your home, in a saf	e deposit box, and on hand when you file you Cash:	portion you own? Do not deduct secured claims or exemptions.
Do <u>:</u> 16.	Casi Exar	h mples: Money y petition No Yes osits of money mples: Checkin brokerag institutio	y legal or you have in g, savings ge houses in, list each	equitable into a your wallet,, or other fina, and other si	Assets terest in any of the form in your home, in a safe ancial accounts; certifications. If you	e deposit box, and on hand when you file you Cash:	portion you own? Do not deduct secured claims or exemptions.
Do <u>y</u> 16.	Casi Exar	h mples: Money y petition No Yes osits of money mples: Checkin brokerag institution No Yes 17.1. ds, mutual fund	y legal or you have in g, savings ge houses n, list each Checkin ds, or pub	equitable into a your wallet, so or other final, and other sinh.	Assets erest in any of the form in your home, in a safe ancial accounts; certifications. If your Institution name: Chase stocks	e deposit box, and on hand when you file you Cash:	portion you own? Do not deduct secured claims or exemptions.
Do <u>y</u> 16.	Casi Exar Depression Bonne Exar	h mples: Money y petition No Yes osits of money mples: Checkin brokerag institution No Yes 17.1. ds, mutual function	g, savings ge houses on, list each	equitable into a your wallet, or other final, and other sinh. g account: blicly traded the the transport the transport to the traded the transport the transport the transport the transport the transport the transport transport the transport tra	in your home, in a safe ancial accounts; certifications. If you has a last institution name: Chase stocks are with brokerage firm	e deposit box, and on hand when you file your Cash:	portion you own? Do not deduct secured claims or exemptions.
Do <u>y</u> 16.	Casi Exar Depression Bonne Exar	h mples: Money y petition No Yes osits of money mples: Checkin brokerag institutio No Yes 17.1. ds, mutual function	g, savings ge houses on, list each	equitable into a your wallet, or other final, and other sinh. g account: blicly traded the the transport the transport to the traded the transport the transport the transport the transport the transport the transport transport the transport tra	in your home, in a safe ancial accounts; certifications. If you has a last institution name: Chase stocks are with brokerage firm	e deposit box, and on hand when you file your Cash:	portion you own? Do not deduct secured claims or exemptions.

Deb			1ea 02/25/16 Do stiment			15:47:29 De er (if known)	
19.	First Name Non-publicly traded stoc		•	nincorporate	d businesses, ir	ncluding	
	an interest in an LLC, pa ✓ No Yes. Give specific information about them	Name of entity:	enture/			% of ownership:	
20.	Government and corpora Negotiable instruments ind Non-negotiable instrument	clude personal checks	s, cashiers' checks	s, promissory i	notes, and money	,	
	No Yes. Give specific information about them	Issuer name:				_	
21.	Retirement or pension ac Examples: Interests in IRA profit-sharing p	A, ERISA, Keogh, 401	(k), 403(b), thrift s	avings accou	nts, or other pens	sion or	
	✓ No ☐ Yes. List each	Type of account:	Institution name) :			
	account separately.	401(k) or similar plan	ı:				
		Pension plan:					
		IRA:					
		Retirement account:					
		Keogh:					
		Additional account:					
		Additional account:					
22.	Security deposits and pr Your share of all unused of Examples: Agreements we companies, or others No	eposits you have madith landlords, prepaid	rent, public utilities	s (electric, gas			
23.	Yes Annuities (A contract for		nstitution name or wment of money to		or life or for a nur	nber of vears)	
	No Yes			•		. ,	
24.	Interests in an education 26 U.S.C. §§ 530(b)(1), 52			E program, o	or under a qualif	ied state tuition pro	ogram.
	Yes	Institution name an	d description. Sep	parately file th	e records of any	interests. 11 U.S.C.	§ 521(c)

Deb	tor 1 Sherrellis	Doc 1 Filed 02/25/ Document ddle Name Last Name		Entered 02/25/1 Page 12 ofc46 nur		esc Main
25.	Trusts, equitable or future inte		any	thing listed in line 1), and	d rights or	
	powers exercisable for your be	enefit				
	✓ No Yes. Give specific information about them					
26.	Patents, copyrights, trademark Examples: Internet domain nam				ents	
	✓ NoYes. Give specific information about them					
27.	Licenses, franchises, and other Examples: Building permits, exc ☑ No ☐ Yes. Give specific	•	issoc	ation holdings, liquor lice	nses, professional licer	nses
	information about them					
Mon	ey or property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you					
	☑ No					
	Yes. Give specific information about them, including whether				Federa	d: \$0.00
	you already filed the returns	GI			State:	\$0.00
	and the tax years				Local:	\$0.00
29.	Family support Examples: Past due or lump sur	n alimony, spousal support, c	hild s	upport, maintenance, divo	orce settlement, proper	ty settlement
	✓ No Yes. Give specific information	on			Alimony:	\$0.00
	rec. erre apecinic innomiali	O.1.			Maintenance:	\$0.00
					Support:	\$0.00
					Divorce settlemen	
					Property settlemen	
					Froperty settlemen	nt
30.	Other amounts someone owes Examples: Unpaid wages, disab compensation, Socia		-			
	No ✓ Yes. Give specific information	on Possible malpractice reviewed by one law			case has been	\$0.00
31.	Interests in insurance policies Examples: Health, disability, or I	ife insurance; health savings	acco	unt (HSA); credit, homeow	ner's, or renter's insura	ance
	☑ No				_	
	Yes. Name the insurance company of each policy and list its value	Company name:		Beneficiary:	S	urrender or refund value:

Deb		02/25/16 15.47.29 Desc Main Of C46 number (if known)
32.	22. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance poentitled to receive property because someone has died	olicy, or are currently
	✓ No✓ Yes. Give specific information	
33.	Claims against third parties, whether or not you have filed a lawsuit or made Examples: Accidents, employment disputes, insurance claims, or rights to sue	a demand for payment
	✓ No✓ Yes. Describe each claim	
34.	 Other contingent and unliquidated claims of every nature, including countercrights to set off claims 	claims of the debtor and
	✓ No ☐ Yes. Describe each claim	
35.	5. Any financial assets you did not already list	
	✓ No ☐ Yes. Give specific information	
36.	6. Add the dollar value of all of your entries from Part 4, including any entries for attached for Part 4. Write that number here	
Pa	Part 5: Describe Any Business-Related Property You Own or Ha	ve an Interest In. List any real estate in Part 1
37.	7. Do you own or have any legal or equitable interest in any business-related pr	roperty?
	✓ No. Go to Part 6. ☐ Yes. Go to line 38.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	8. Accounts receivable or commissions you already earned	
	✓ No ☐ Yes. Describe	
39.	99. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax desks, chairs, electronic devices	machines, rugs, telephones,
	☑ No ☐ Yes. Describe	
40.	0. Machinery, fixtures, equipment, supplies you use in business, and tools of you	our trade
	✓ No ☐ Yes. Describe	
41.	1. Inventory	
	✓ No Yes. Describe	
42.	2. Interests in partnerships or joint ventures	
	✓ No Yes. Describe Name of entity:	% of ownership:

Deb	Case 16-06336 Doc 1 Filed 02/25/16 Entered 02/25/16 15:47:29 D tor 1 Sherrellis Docstiment Page 14 of 6 number (if known) First Name Middle Name Last Name	esc Main
43.	Customer lists, mailing lists, or other compilations	
	 No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe 	
44.	Any business-related property you did not already list	
	✓ No Yes. Give specific information	
45.	Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	\$0.00
Pa	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have a lf you own or have an interest in farmland, list it in Part 1.	n Interest In.
16	Do you own or have any local or equitable interest in any form, or commercial fishing related property?	
+0.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47.	
		Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm animals Examples: Livestock, poultry, farm-raised fish	
	✓ No ✓ Yes	
48.	Cropseither growing or harvested	
	. S S	
	Yes. Give specific information	
49.	Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
	✓ No ☐ Yes	
50.	Farm and fishing supplies, chemicals, and feed	
	✓ No ☐ Yes	
51.	Any farm- and commercial fishing-related property you did not already list	
	✓ No Yes. Give specific information	
52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have	40.00
	attached for Part 6. Write that number here	\$0.00

Sherrellis Debtor 1

62. Total personal property. Add lines 56 through 61.....

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

Docsimente

Page 15 of 6 number (if known)

Copy personal

property total

\$17,635.00

\$97,635.00

\$17,635.00

Middle Name Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership **☑** No ☐ Yes. Give specific information..... \$0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here..... List the Totals of Each Part of this Form \$80,000.00 \$16,000.00 56. Part 2: Total vehicles, line 5 57. Part 3: Total personal and household items, line 15 \$1,350.00 58. Part 4: Total financial assets, line 36 \$285.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00

Fill in this inf	ormation to i	dentify your case	:
Debtor 1	Sherrellis		Stinnette
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar	nkruptcy Court fo	r the: NORTHERN D	ISTRICT OF ILLINOIS
Case number			
(if known)			

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Cla	im as Exempt		
 Which set of exemptions are you claiming? You are claiming state and federal nonban You are claiming federal exemptions. 11 L For any property you list on Schedule A/B th 	kruptcy exemptions. J.S.C. § 522(b)(2)	• ,,,,	,
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief home - 544 S. Martin Luther description: King Dr., Ave., Waukegan Line from Schedule A/B: 1.1	\$80,000.00	\$15,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901
Brief Refrigerator, description: stove,washer/dryer bedroom Line from Schedule A/B:6	\$1,000.00	\$1,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
3. Are you claiming a homestead exemption of School (Subject to adjustment on 4/01/16 and every 3 y No Yes. Did you acquire the property covered No Yes			

Debtor 1

Line from

Line from

Schedule A/B:

Schedule A/B:

17.1

description: her mother. This case has

30

Possible malpractice case for

Sherrellis

First Name Middle Name Last Name

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value, up to any

limit

limit

\$0.00

applicable statutory

\$30,000.00

100% of fair market value, up to any

applicable statutory

735 ILCS 5/12-1001(h)(4)

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief Books, pictures & collections description: Line from Schedule A/B:8	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief clothing description: Line from Schedule A/B: 11	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e)
Brief Furs & jewelry description: Line from Schedule A/B: 12	\$150.00	\$150.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief Cash description: Line from Schedule A/B:16	\$35.00	\$35.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief Chase description:	\$250.00	\$250.00 100% of fair market	735 ILCS 5/12-1001(b)

Case	16-06336 DC	oc 1 Filed 02		tered 02/25/16 15	0:47:29 Desc N	⁄lain		
Fill in this inf	ormation to ident	Docum	ieni Pan	e 18 of 46				
		illy your case.						
Debtor 1	Sherrellis		Stinnette					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bar	nkruptcy Court for the:	NORTHERN DIS	TRICT OF ILL IN	iois				
Officed States Bai	initiapity Count for the.	NORTHERN DIO	TRICT OF ILLIE	1010				
Case number					☐ Check if this is	s an		
(if known)					amended filing	J		
Be as complete ar	Creditors Wh	ble. If two married	people are filing	together, both are equal				
	n. If more space is r additional pages, wr		•	II it out, number the entr nown).	ies, and attach it to thi	s form.		
1. Do any credit	ors have claims sec	ured by your prope	rty?					
☐ No. Che	ck this box and submi	t this form to the cou	rt with your other	schedules. You have not	ning else to report on the	is form.		
✓ Yes. Fill	in all of the informatio	n below.						
		_						
Part 1: Lis	t All Secured Cla	ims						
	ed claims. If a credito			0.4	0.4	0.1.0		
	creditor separately for particular claim, list th			Column A Amount of claim	Column B Value of collateral	Column C Unsecured		
	ible, list the claims in			Do not deduct the	that supports this	portion		
creditor's nam		•	· ·	value of collateral	claim	If any		
		Describe the pr	ronerty that					
2.1		secures the cla		\$750.00	\$0.00	\$750.00		
Aarons		— Table & China	a Cabinet					
Creditor's name 1403 N. Lewis A	ve.							
Number Street								
Waukegan	IL 60085	As of the date y	you file, the claim	n is: Check all that apply.				
City	State ZIP Code	Contingent						
Who owes the deb	ot? Check one.	☐ Unliquidated	Ł					
_ 5	Disputed							
Debtor 1 only Debtor 2 only		Nature of lien.	Check all that ap	vla.				
Debtor 1 and D	ebtor 2 only		•	ch as mortgage or secured	I car loan)			
_	the debtors and anoth	_		n, mechanic's lien)	,			
			en from a lawsuit					
Check if this o		_	ding a right to offs	set)				
Date debt was inc	urred	Last 4 digits of	account number	·				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$750.00

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Sherrellis Debtor 1

Documente

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Column A

Column C

Column B

First Name Middle Name

Additional Page

Part 1:		ng any entries on Ily from the previo	this page, number them ous page.	Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecured portion If any			
2.2			Describe the property that secures the claim:	\$11,459.00	\$0.00	\$11,459.00			
State Farm			Porsche						
Creditor's name	_e Farm Plaza		1 0100110						
Number Str									
Bloomingt	on IL	61710	As of the date you file, the claim is:	Check all that apply.					
City	State	e ZIP Code	☐ Contingent						
Who owes t	ho dobt? (Check one.	Unliquidated						
√ Debtor 1		oneck one.	Disputed						
Debtor 2	•		Nature of lien. Check all that apply.						
Debtor 1	and Debtor 2	2 only	An agreement you made (such as mortgage or secured car loan)						
At least	one of the de	btors and another	Statutory lien (such as tax lien, mechanic's lien)						
			☐ Judgment lien from a lawsuit						
	f this claim re nmunity deb		Other (including a right to offset)						
Date debt w	as incurred		Last 4 digits of account number						
2.3			Describe the property that secures the claim:	\$4,000.00	\$4,000.00				
Turner Acc			auto						
Creditor's name 530 W. Dur									
Number Str									
Wheeling	<u>IL</u>	60090-2675	As of the date you file, the claim is:	Check all that apply.					
City	State	e ZIP Code	Contingent						
Who owes t	he debt? (Check one.	Unliquidated						
Debtor 1	only		Disputed						
Debtor 2	•		Nature of lien. Check all that apply.						
Debtor 1 and Debtor 2 only			An agreement you made (such as	mortgage or secured	car loan)				
_		btors and another	Statutory lien (such as tax lien, me		•				
_			Judgment lien from a lawsuit	,					
Check if	f this claim r	elates	Other (including a right to offset)						

Add the dollar value of your entries in Column A on this page. Write that number here:

\$15,459.00

to a community debt

Date debt was incurred

Last 4 digits of account number

Debtor 1 Sherrellis
First Name

Middle Name

Documente

Last Name

Page 20 of 46e number (if known)

Part 1:

Additional Page

After listing any entries on this page, number them sequentially from the previous page.

Column A

Amount of claim

Do not deduct the value of collateral

Column B
Value of collateral
that supports this
claim

Column C
Unsecured
portion
If any

Wells Fargo Dealer Services Creditor's name P.O. Box 25341 Number Street	Describe the property that secures the claim: 2007 Mercedes Benz	\$12,736.00	\$12,736.00		
Santa Ana CA 92799 City State ZIP Code	As of the date you file, the claim is: Contingent	Check all that apply.			
Who owes the debt? Check one. Debtor 1 only	☐ Unliquidated ☐ Disputed				
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Mature of lien. Check all that apply. ☐ An agreement you made (such as ☐ Statutory lien (such as tax lien, module) ☐ Judgment lien from a lawsuit	• •	loan)		
Check if this claim relates to a community debt	Other (including a right to offset)		_		
Date debt was incurred	Last 4 digits of account number				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$12,736.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$28,945.00

Fill in this inf	ormation to ide		:
Debtor 1	Sherrellis		Stinnette
	First Name	Middle Name	Last Name
Debtor 2	First Name	Middle Name	Last Name
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bar	nkruptcy Court for th	e: NORTHERN D	ISTRICT OF ILLINOIS
Case number			
(if known)			

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

- 1. Do any creditors have priority unsecured claims against you?
 - No. Go to Part 2.
 - ☐ Yes.
- 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim	Priority	Nonpriority
	amount	amount

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No. You have nothing to report in this part. Submit this form to the court with you other schedules.

Debtor 1

Yes abla

Sherrellis

First Name Middle Name Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims

Do any creditors have nonpriority unsecured claims against you?

If a creditor has more than one nonpriority unsectype of claim it is. Do not list claims already incl	in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what luded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2.	
	Total claim	
4.1	\$4,731.00	į
Best Egg/SST	Last 4 digits of account number	
Nonpriority Creditor's Name 4315 Pickett Road	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
Saint Joseph MO 64503 City State ZIP Code	_ ☐ Contingent ☐ Unliquidated _ ☐ Disputed	
Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Yes 4.2	\$564.00	<u>) </u>
Capital One Nonpriority Creditor's Name	Last 4 digits of account number	
P.O. Box 30285	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. ☐ Contingent	
Salt Lake City UT 84130-0285 City State ZIP Code	Unliquidated Disputed	
Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ✓ No ☐ Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify	

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Sherrellis

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Debtor 1

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

previous page.	in sequentially from the	Total claim
4.3		\$50.00
City of Waukegan	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 457 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
Wheeling IL 60090	Unliquidated	
City State ZIP Code	_ ☐ Disputed	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only Debtor 2 only	☐ Student loans	
Debtor 2 only Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another	that you did not report as priority claims	
Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Is the claim subject to offset?	<u></u>	
☑ No		
Yes		
4.4		\$858.00
Comenity Capital Bank	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
Attn: Bankruptcy Dept. Number Street	As of the date you file, the claim is: Check all that apply.	
P.O. Box 183043	_ Contingent	
Columbus OH 43218-3043	Unliquidated	
City State ZIP Code	— ☐ Disputed	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another	that you did not report as priority claims	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	✓ Other. Specify	
✓ No		
Yes		
4.5		\$1,710.00
LJ Fingerhut	Last 4 digits of account number	φ1,710.00
Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 1250 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
Saint Cloud MN 56395-1250	Unliquidated	
City State ZIP Code	— ☐ Disputed	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only At least one of the debtors and another	that you did not report as priority claims	
	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset? ✓ No		
Yes Yes		

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Part 2:

Sherrellis

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Debtor 1

First Name Middle Name Last Name

Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number then previous page.	m sequentially from the	Total claim
4.6		\$546.00
Gettington Account Services	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. Box 1500	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
St. Cloud MN 56395-1500	Unliquidated	
City State ZIP Code	_ ☐ Disputed	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only At least one of the debtors and another	that you did not report as priority claims	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	✓ Other. Specify	
No		
Yes		
<u> </u>		
4.7		\$2,227.00
Merrick Bank	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 1500 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
Droper III 94020	Unliquidated	
Draper UT 84020 City State ZIP Code	_ ☐ Disputed	
Who incurred the debt? Check one.	Type of NONDRIORITY unaccured eleims	
☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?		
☑ No		
Yes		
4.8		\$2,500.00
PayPal Credit, C/O Comenity Capital Bank	Last 4 digits of account number	φ2,300.00
Nonpriority Creditor's Name	When was the debt incurred?	
P.O. Box 5018		
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
Timonium MD 21094	_ ☐ Disputed	
City State ZIP Code Who incurred the debt? Check one.		
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
At least one of the debtors and another	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	<u> </u>	
☑ No		
Yes		

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Part 2:

Sherrellis

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Debtor 1

First Name

Last Name

Your NONPRIORITY Unsecured Claims -- Continuation Page

Middle Name

After listing any entries on this page, number then previous page.	n sequentially from the	Total claim
SYNCB/Home Design Furniture Nonpriority Creditor's Name P.O. Box 965036 Number Street Orlando FL 32896-5038 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	\$1,659.00
4.10 Synchrony Bank/Care Credit Nonpriority Creditor's Name P.O. Box 965061 Number Street	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent	\$801.00
Orlando FL 32896-5061 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify	
No Yes 4.11 Turner Acceptance Nonpriority Creditor's Name 4454 N. Western Ave. Number Street	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent	\$2,410.00
Chicago IL 60625 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	

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Sherrellis

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

✓ No Yes

At least one of the debtors and another

☐ Check if this claim is for a community debt

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

Debtor 1

Middle Name First Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.12 \$1,709.00 Webbank/Fingerhut Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 6250 Ridgewood Road As of the date you file, the claim is: Check all that apply. Number Street Contingent Unliquidated **Saint Cloud** MN 56303 Disputed State ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 2 only

that you did not report as priority claims

Other. Specify

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Debtor 1

Sherrellis First Name

Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. -	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$0.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} -	\$19,765.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$19,765.00

	-		Доси Воси	ment Page	28 of 46	.c Bood Main	
Fil	II in this info	ormation to ider	tify your case:		. •		
De	btor 1	Sherrellis First Name	Middle Name	Stinnette Last Name			
	btor 2 bouse, if filing)		Middle Name	Last Name			
				STRICT OF ILLINO	ıs İ		
Ca	se number known)			_		Check if this is an amended filing	
	icial Form		ontracts and	Unexpired Le	eases		12/15
corr On t	ect informatio he top of any	n. If more space is	needed, copy the a rite your name and	dditional page, fill it case number (if kno	gether, both are equally resp out, number the entries, and wn).		
	☐ No. Ched	ck this box and file th	is form with the coul	t with your other sche	dules. You have nothing else re listed on Schedule A/B: Proj	•	
2.	is for (for exa		ease, cell phone).		oct or lease. Then state what or this form in the instruction bo		
	Person or	company with who	m you have the cor	tract or lease	State what the contract or	lease is for	
2.1	Name 1403 N. L	ewis Ave.			Table & China Cabinet Contract to be ASSUME	D	

60085 ZIP Code

State

Waukegan City

		Doci	<u>ıment Pane 29</u>	<u> 146</u>	
Fill in this inf	ormation to i	dentify your case	:		
Debtor 1	Sherrellis	AC 111 N	Stinnette		
	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle Nieses	L and Niaman	_	
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court fo	r the: NORTHERN D	ISTRICT OF ILLINOIS	_	
Case number					☐ Check if this
(if known)					amended fil

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) ☑ No ☐ Yes
2.	Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) ✓ No. Go to line 3. ✓ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? ✓ No ✓ Yes
3.	In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on <i>Schedule D</i> (Official Form 106D), <i>Schedule E/F</i> (Official Form 106E/F), or <i>Schedule G</i> (Official Form 106G). Use

Column 1: Your codebtor

Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

		Docu	ment Pag	e 30 of	46	
Fill in this inforr	mation to identify	your case:				
Debtor 1	Sherrellis		Stinnette)		
	First Name	Middle Name	Last Name		Che	eck if this is:
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		_	An amended filing
			DISTRICT OF IL	LINOIS		A supplement showing postpetition
Case number	cruptcy Court for the:	NONTHERN	DISTRICT OF IL	LINOIS	-	chapter 13 income as of the following date:
(if known)				 ·		MM / DD / YYYY
Official Form 10	nei					
-						40/45
Schedule I: Yo	our income					12/15
responsible for suppinclude information a about your spouse. I your name and case	lying correct informations in the second section in the second section in the second s	ation. If you ard f you are separ ded, attach a se Answer every c	e married and not rated and your spo eparate sheet to th	filing jointl ouse is not	y, and your filing with y	d Debtor 2), both are equally spouse is living with you, rou, do not include information any additional pages, write
1. Fill in your empl	oyment					
information. If you have more	than one		Debtor 1			Debtor 2 or non-filing spouse
job, attach a sepa	arate page Emplo	yment status	☐ Employed			Employed
with information a additional employ	vers.		✓ Not employ	ed		■ Not employed
	Occup	ation				_
Include part-time, or self-employed		yer's name	Home Instad S	Senior Ca	re	
Occupation may i	inaluda –				_	
student or homen	- inpio	yer's address	Number Street	on, Ste. 20	3	Number Street
applies.						
			-			-
			Grayslake	IL State	60030 Zip Code	City State Zip Code
			City	State	Zip Code	City State Zip Code
	How Id	ong employed t	here?			
Part 2: Give I	Details About Mo	onthly Incom	۵			
				: t	ut fau au . lia a	white the committee the committee that we want
non-filing spouse unles		ou file this for	n. If you have noth	ling to repo	nt for any line	e, write \$0 in the space. Include your
If you or your non-filing you need more space,			er, combine the inf	ormation fo	r all employe	rs for that person on the lines below. If
				For	Debtor 1	For Debtor 2 or non-filing spouse
	ess wages, salary, ar s). If not paid monthly			2	\$2,800.00	
3. Estimate and list	t monthly overtime p	ay.		3. +	\$0.00	<u> </u>
4. Calculate gross	income. Add line 2	+ line 3.		4.	\$2,800.00	

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Debtor 1 Sherrellis

First Name Middle Name Last Name

Case number (if known)

		! -	For Debtor 1	For Debtor		
	Copy line 4 here	→ 4.	\$2,800.00			
5.	List all payroll deductions:					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$630.00			
	5b. Mandatory contributions for retirement plans	5b.	\$0.00			
	5c. Voluntary contributions for retirement plans	5c.	\$0.00			
	5d. Required repayments of retirement fund loans	5d.	\$0.00			
	5e. Insurance	5e.	\$0.00			
	5f. Domestic support obligations	5f.	\$0.00			
	5g. Union dues	5g.	\$0.00			
	5h. Other deductions.	٠9.				
	Specify:	5h. +	\$0.00			
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	÷ 6.	\$630.00			
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4	1. 7.	\$2,170.00			
8.	List all other income regularly received:					
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00			
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.					
	8b. Interest and dividends	8b.	\$0.00			
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.					
	8d. Unemployment compensation	8d.	\$0.00			
	8e. Social Security	8e.	\$0.00			
	8f. Other government assistance that you regularly receive					
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	Specify:	8f.	\$0.00			
	8g. Pension or retirement income	8g.	\$0.00	-		
	8h. Other monthly income.	og.				
	Specify: car payment from son	8h. 🛧	\$316.00			
		_ ',				
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h	n. 9.	\$316.00			
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$2,486.00	+	=	\$2,486.00
11.	State all other regular contributions to the expenses that you list in Include contributions from an unmarried partner, members of your hous friends or relatives.			r roommates,	and other	
	Do not include any amounts already included in lines 2-10 or amounts to	hat are no	ot available to pay e	expenses liste	d in Sche	dule J.
	Specify:				11. +	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 1 income. Write that amount on the Summary of Your Assets and Liabiliti if it applies.				12.	\$2,486.00 Combined monthly income
13.	Do you expect an increase or decrease within the year after you file	e this form	n?			•
	✓ No. None. Yes. Explain:					

F	ill in this inforn	nation to ide	ntify yo	our case:		WE .1/ UL 40	Cha	ck if this	ie:	
	Debtor 1	Sherrellis			Stinne	ette			nded filing	
		First Name	N	/liddle Name	Last Na		$ \vdash$	A suppl	ement showing	
	Debtor 2 (Spouse, if filing)	First Name	N	/liddle Name	Last Nai	me		cnapter followin	13 expenses a g date:	as of the
	United States Bank	ruptcy Court for	the: NO	ORTHERN DI	ISTRICT OF	ILLINOIS		MM / DI	D / YYYY	
	Case number							IVIIVI / DI	וווו / כ	
	(if known)									
Of	ficial Form 10	06J								
	hedule J: Yo		ses							12/15
cor		If more space is	s needed	, attach anoth	er sheet to tl	ng together, both anhis form. On the top				
Р	art 1: Descr	ibe Your Ho	useholo	d						
1.	Is this a joint cas	se?								
	No	Debtor 2 live in				s for Separate House	hold of	Debtor :	2.	
2.	Do you have dep	endents?	√ No							
	Do not list Debtor Debtor 2.	1 and		Fill out this in each dependen		Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?
	Do not state the d names.	lependents'								Yes
3.	Do your expense expenses of peo yourself and you	ple other than		No Yes						−
Р	art 2: Estim	ate Your On	going N	onthly Exp	enses					
to r		of a date after	the bank			re using this form as supplemental Sche				
	lude expenses pai ch assistance and		_		-	know the value of cial Form 106l.)			Your expen	ses
4.	The rental or hor Include first morto							4	l	
	If not included in		Í	, and the second						
	4a. Real estate t	axes						4	a	\$108.00
	4b. Property, hor	meowner's, or re	nter's ins	urance				4	lb	
	4c. Home mainte	enance, repair, a	and upke	ep expenses				4	lc.	\$175.00

4d.

4d. Homeowner's association or condominium dues

Case 16-06336 Doc 1 Document Stinnette Page 33 of 46

Debtor 1 Sherrellis

First Name

Middle Name

Last Name

Case number (if known)

		Your expen	ses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	
	6b. Water, sewer, garbage collection	6b.	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	
	6d. Other. Specify:	6d.	
7.	Food and housekeeping supplies		\$400.00
8.	Childcare and children's education costs	8.	ψ 100100
9.	Clothing, laundry, and dry cleaning	9.	\$75.00
		10.	· · · · · · · · · · · · · · · · · · ·
10.	Personal care products and services		\$75.00
11.		11.	\$100.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$350.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$35.00
14.	Charitable contributions and religious donations	14.	
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	
	15b. Health insurance	15b	
	15c. Vehicle insurance	15c	\$147.00
	15d. Other insurance. Specify:	15d	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1 2007 Mercedes	17a	\$316.00
	17b. Car payments for Vehicle 2	17b	
	17c. Other. Specify: leased auto	17c	\$150.00
	17d. Other. Specify:	17d	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18	
19.	Other payments you make to support others who do not live with you. Specify:	19.	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
	20a. Mortgages on other property	20a.	
	20b. Real estate taxes	20b	
	20c. Property, homeowner's, or renter's insurance	20c	
	20d. Maintenance, repair, and upkeep expenses	20d	
	20e. Homeowner's association or condominium dues	20e	

		Case 16-06336 Doc 1 Filed 02/25/16 Entered 02/25/16 15:47	:29	Desc Main
Deb	tor 1	Sherrellis Document Page 34 of 46 Case number	(if knov	vn)
		First Name Middle Name Last Name		
21.	Othe	er. Specify:	21.	+
22.	Calc	culate your monthly expenses.		
	22a.	Add lines 4 through 21.	22a.	\$1,931.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b.	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$1,931.00
23.	Calc	culate your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$2,486.00
	23b.	Copy your monthly expenses from line 22c above.	23b.	\$1,931.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$555.00
24.	Doy	ou expect an increase or decrease in your expenses within the year after you file this form?		
		example, do you expect to finish paying for your car loan within the year or do you expect your mortgonent to increase or decrease because of a modification to the terms of your mortgage?	age	
	$\overline{\mathbf{A}}$	No		
		Yes. Explain here: None.		
		Notice.		

		Doci	iment Page 35	<u>: of 4</u> 6	
Fill in this in	formation to i	dentify your case			
Debtor 1	Sherrellis		Stinnette		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court fo	the: NORTHERN D	ISTRICT OF ILLINOIS		
Case number				☐ Check if	thic ic on
(if known)				amended	
					-
Official Form	n 106Sum				
Summary o	f Your Asse	ts and I iahilit	ies and Certain S	Statistical Information	12/1
	1 10di A330				12/1
schedules after y		nal forms, you must f	•	nation on this form. If you are filing nd check the box at the top of this p	
					Your assets
4 0-1-1-1-1-1-1	D. D	I Farra 400 A (D)		`	Value of what you own
1. Schedule A/E	3: Property (Officia	II FORM 106A/B)			***
1a. Copy lin	e 55, Total real es	tate, from Schedule A/	В		\$80,000.00
1b. Copy lin	e 62, Total persor	al property, from Sche	dule A/B		\$17,635.00
1c. Copy lin	e 63, Total of all p	roperty on Schedule A	/B		\$97,635.00
Part 2: Su	ımmarize You	r Liabilities			
					Your liabilities Amount you owe
			Property (Official Form 10 claim, at the bottom of the	06D) e last page of Part 1 of Schedule D	\$28,945.00
			s (Official Form 106E/F) red claims) from line 6e of	f Schedule E/F	\$0.00
3b. Copy the	e total claims from	Part 2 (nonpriority uns	secured claims) from line 6	sj of Schedule E/F +	\$19,765.00
				Your total liabilities	\$48,710.00
Part 3: Su	ımmarize You	r Income and Exp	enses	Your total liabilities	\$48,710.00

Schedule I: Your Income (Official Form 106I)

Schedule J: Your Expenses (Official Form 106J)

Copy your combined monthly income from line 12 of Schedule I.....

Copy your monthly expenses from line 22c of Schedule J.....

\$2,486.00

\$1,931.00

Debtor 1

Sherrellis
First Name

Middle Name

Documents

Documents

Dage 36 of 46 number (if known)

Last Name

Part 4: A	nswer These	Questions for	Administrative and	Statistical Records
-----------	-------------	----------------------	--------------------	---------------------

6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes
7.	What kind of debt do you have?
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
9g. Total. Add lines 9a through 9f.	\$0.00

Case		Doci	iment Page 37 o	of 46	
Fill in this inf	formation to id	lentify your case:		+0	
Debtor 1	Sherrellis		Stinnette	_	
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	_	
United States Ba	ankruptcy Court for	the: NORTHERN D	ISTRICT OF ILLINOIS		
Case number				☐ Check if this is an	
(if known)				amended filing	
Official Form	106Dec				
Declaration	About an Ir	ndividual Debt	or's Schedules	1:	2/15
If two married ped	ople are filing tog	ether, both are equal	ly responsible for supplyin	g correct information.	
·		•		-	
You must file this concealing prope	form whenever y	ou file bankruptcy so money or property by	chedules or amended sche y fraud in connection with a	dules. Making a false statement, a bankruptcy case can result in fines up to	
You must file this concealing prope	form whenever y	ou file bankruptcy so money or property by	chedules or amended sche	dules. Making a false statement, a bankruptcy case can result in fines up to	
You must file this concealing prope \$250,000, or impri	form whenever yerty, or obtaining isonment for up t	ou file bankruptcy so money or property by	chedules or amended sche y fraud in connection with a	dules. Making a false statement, a bankruptcy case can result in fines up to	
You must file this concealing prope \$250,000, or impri	form whenever y	ou file bankruptcy so money or property by	chedules or amended sche y fraud in connection with a	dules. Making a false statement, a bankruptcy case can result in fines up to	
You must file this concealing prope \$250,000, or impri	form whenever yerty, or obtaining isonment for up to	ou file bankruptcy so money or property by o 20 years, or both.	chedules or amended sche y fraud in connection with a	dules. Making a false statement, a bankruptcy case can result in fines up to 9, and 3571.	
You must file this concealing prope \$250,000, or impri	form whenever yerty, or obtaining isonment for up to	ou file bankruptcy so money or property by o 20 years, or both.	chedules or amended sche y fraud in connection with a 18 U.S.C. §§ 152, 1341, 1519	dules. Making a false statement, a bankruptcy case can result in fines up to 9, and 3571.	
You must file this concealing prope \$250,000, or impri	form whenever yerty, or obtaining isonment for up to	ou file bankruptcy so money or property by o 20 years, or both.	chedules or amended sche y fraud in connection with a 18 U.S.C. §§ 152, 1341, 1519	dules. Making a false statement, a bankruptcy case can result in fines up to 9, and 3571.	

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Sherrellis Stinnette	X
Signature of Debtor 1	Signature of Debtor 2
Date <u>02/20/2016</u> MM / DD / YYYY	Date MM / DD / YYYY

	Ouse	то ососо В	Docu	ment Pa	age 38 of 46	5/10 10.47.2		Tani
Fil	l in this info	ormation to ide	ntify your case:					
Del	otor 1	Sherrellis First Name	Middle Name	Stinnette Last Name				
	otor 2 ouse, if filing)	First Name	Middle Name	Last Name				
Uni	ted States Bar	nkruptcy Court for the	e: NORTHERN DI	STRICT OF IL	LINOIS			
	se number known)				_		Check if this is amended filing	
	cial Form		ffairs for Indi	viduals Fi	ling for Ban	kruptcy		12/15
your	name and ca	se number (if know	needed, attach a s n). Answer every o : Your Marital St	question.			litional pages, w	rite
	What is your of Married ✓ Not marrie	current marital stat	us?					
	☑ No		u lived anywhere ot lived in the last 3 ye			now.		
	Debtor 1:			es Debtor 1 d there	Debtor 2:			ates Debtor 2 ed there
	(Community p	•	ever live with a spou erritories include Ariz	• •		• • • •	•	
	EZI No							

Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Filed 02/25/16 Entered 02/25/16 15:47:29 Case 16-06336 Desc Main Doc 1

Sherrellis Debtor 1

First Name

Documente Middle Name Last Name

Page 39 of 46e number (if known)

Part 2: Explain the Sources of Your Income
--

	-						
4.	Did you have any income from employer Fill in the total amount of income you receilf you are filing a joint case and you have	eived from all jobs and all bus	inesses, including par	t-time activities.	calendar years?		
	✓ No Yes. Fill in the details.						
Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Sec unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once undertail the provided together.							
	List each source and the gross income from	om each source separately. C	Oo not include income	that you listed in line 4.			
	No✓ Yes. Fill in the details.						
		Debtor 1		Debtor 2			
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions		
	m January 1 of the current year until date you filed for bankruptcy:	Home Instead Senior C	are \$3,363.00				
	the last calendar year: nuary 1 to December 31, 2015)	Home Instead Senior C	are \$37,459.00				
	the calendar year before that: huary 1 to December 31, 2014)	Wage	\$35,000.00				
Jul	idaly i to Doddillool oi, Zuit /						

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Debtor 1

Documente Page 40 of 46 number (if known) Sherrellis

		iist ivailie	ivildale i	varie	Lastivaine			
Р	art 3:	List Ce	ertain Paymen	ts You Mad	de Before Y	ou Filed for Bar	nkruptcy	
6.	Are eithe	er Debtor	1's or Debtor 2's	debts primai	rily consumer	debts?		
	□ No.			-	-	ner debts. Consumily, or household pur		ed in 11 U.S.C. § 101(8) as
		During t	the 90 days before	you filed for l	bankruptcy, dic	l you pay any credito	or a total of \$6,225*	or more?
		□ No.	Go to line 7.					
		☐ Yes.	total amount you	paid that cred	ditor. Do not in	otal of \$6,225* or molecule payments for depayments to an a	domestic support o	obligations, such as
		* Subjec	ct to adjustment or	1 4/01/16 and	every 3 years	after that for cases f	iled on or after the	date of adjustment.
	∀ Yes.	Debtor	1 or Debtor 2 or b	ooth have pri	marily consur	ner debts.		
		During t	the 90 days before	you filed for l	bankruptcy, dic	you pay any credito	or a total of \$600 or	more?
		✓ No.	Go to line 7.					
		Yes.	creditor. Do not	include paym	ents for domes	otal of \$600 or more tic support obligation for this bankruptcy o	ns, such as child si	
					Dates of payment	Total amount paid	Amount you stil owe	Was this payment for
7.	Insiders i corporation agent, income	nclude yo ons of whi cluding on	our relatives; any g ich you are an offic	eneral partne cer, director, p	rs; relatives of person in contro	any general partners ol, or owner of 20% of	s; partnerships of wor more of their vot	e who was an insider? hich you are a general partner; ing securities; and any managing is for domestic support obligations
	✓ No ☐ Yes.	List all pa	ayments to an insi	der.				
					Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
8.		year befo	•	ankruptcy, d	id you make a	ny payments or tra	nsfer any propert	y on account of a debt that
			on debts guarante	ed or cosigne	d by an insider			

☑ No

 $\hfill \square$ Yes. List all payments that benefited an insider.

Dates of payment **Total amount** paid

Amount you still owe

Reason for this payment Include creditor's name

Case 16-06336 Filed 02/25/16 Entered 02/25/16 15:47:29 Desc Main Doc 1 Sherrellis **Docsumente** Page 41 of 6 number (if known) Debtor 1 Middle Name Identify Legal Actions, Repossessions, and Foreclosures Part 4: Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. **☑** No ☐ Yes. Fill in the details. Nature of the case Court or agency Status of the case 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Tyes. Fill in the information below. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? ☐ Yes. Fill in the details. 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? **☑** No ☐ Yes

Part 5: List Certain Gifts and Contributions

13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?
	No.

Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

✓ No✓ Yes. Fill in the details for each gift or contribution.

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

☑ No

Yes. Fill in the details.

Debtor 1

Part 7:

Sherrellis

Docsimente

Page 42 of 46 number (if known)

Middle Name First Name

List Certain Payments or Transfers

16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.				
	No Yes. Fill in the details.				
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?				
	Do not include any payment or transfer that you listed on line 16.				
	✓ No ☐ Yes. Fill in the details.				
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?				
	Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.				
	✓ No Yes. Fill in the details.				
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)				
	✓ No ☐ Yes. Fill in the details.				

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

✓ No Yes. Fill in the details.

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

☑ No

Part 8:

☐ Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

Yes. Fill in the details.

Case 16-06336 Filed 02/25/16 Entered 02/25/16 15:47:29 Desc Main Doc 1 **Sherrellis** Docsumente Docsumente Page 43 of 6 number (if known) Debtor 1 Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **☑** No ☐ Yes. Fill in the details. **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? **⋈** No Yes. Fill in the details. 25. Have you notified any governmental unit of any release of hazardous material? **☑** No ☐ Yes. Fill in the details. 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. **V** No ☐ Yes. Fill in the details. Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Debtor 1	Case 16-06336 Sherrellis First Name		d 02/25/16 CSIMENTE Last Name	Entered 02/25/16 15:47:2 Page 44 of 46 number (if known					
	8. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.								
	No Yes. Fill in the details be	low.							
Part 1	2: Sign Below								
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X /s/ Sherrellis Stinnette									
	ature of Debtor 1		Signature of	f Debtor 2					
Date	02/20/2016		Date						
Did you	Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?								
✓ No ☐ Yes									
Did you	Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?								
☑ No									
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice, Signature (Official Form 119).				

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS CHICAGO DIVISION (EASTERN)

In	in re Sherrellis Stinnette	Case No.				
		Chapter	13			
	DISCLOSURE OF COMPENSATION OF ATTOR	RNEY FO	R DEBTOR			
1.	 Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the that compensation paid to me within one year before the filing of the petition in b services rendered or to be rendered on behalf of the debtor(s) in contemplation is as follows: 	ankruptcy, or	agreed to be paid to me, for			
	For legal services, I have agreed to accept		\$4,000.00			
	Prior to the filing of this statement I have received		\$0.00			
	Balance Due		54,000.00			
2.	2. The source of the compensation paid to me was: ☐ Debtor ☐ Other (specify)					
3.	3. The source of compensation to be paid to me is:					
	✓ Debtor □ Other (specify)					
4.	✓ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.					
☐ I have agreed to share the above-disclosed compensation with another person or persons who are not me associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing compensation, is attached.						
5.	5. In return for the above-disclosed fee, I have agreed to render legal service for a	ll aspects of t	he bankruptcy case, including:			
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor bankruptcy; 	r in determiniı	ng whether to file a petition in			
	b. Preparation and filing of any petition, schedules, statements of affairs and pla	an which may	be required;			
	c. Representation of the debtor at the meeting of creditors and confirmation hea	aring, and any	y adjourned hearings thereof;			

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

SERVICES REQUESTED AFTER DISCHARGE AND/OR DISMISSAL REPRESENTATION OF THE DEBTOR IN ADVERSARY PROCEEDINGS

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

02/20/2016 /s/ Kenneth S. Borcia

Date Kenneth S. Borcia Bar No. 3125988

Kenneth S. Borcia & Associates 1117 S. Milwaukee, Suite A-3 Libertyville, IL 60048

Phone: (847) 634-8800 / Fax: (847) 634-8932

/s/ Sherrellis Stinnette

Sherrellis Stinnette